

□ Step 1: Activate Your VAMS Account

What you'll need to complete this step

- Access to the internet
- Access to your email account
- Registration email from **vams@cdc.gov**

You must activate an account in VAMS to use the system. After the organization coordinator for your organization enters your name and email address in VAMS, you will receive an email with a VAMS registration link. VAMS will send you up to five reminder registration emails until you register.

- Search your inbox for an email from **vams@cdc.gov**.

Quick Tip: If this email is not in your inbox, you may need to check your junk or spam mail folders. If you still cannot find the email, contact your organization coordinator.

- Click the **registration link** in the email. This will take you to the prescreener page in VAMS.

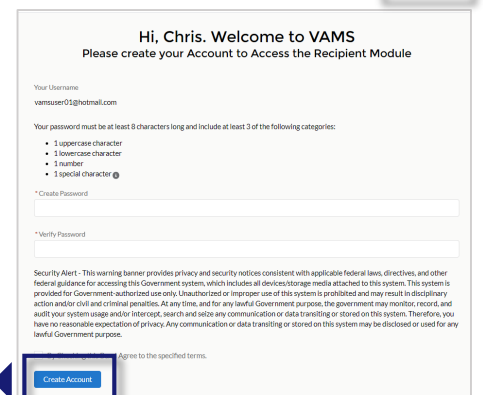
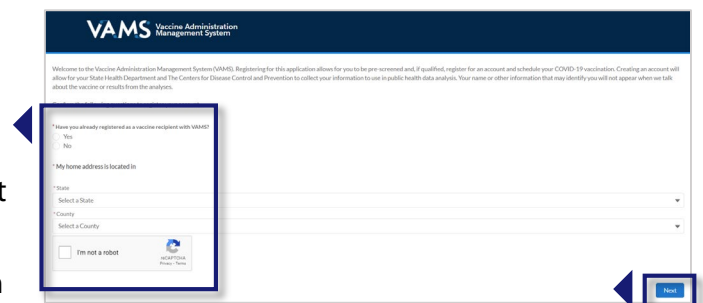
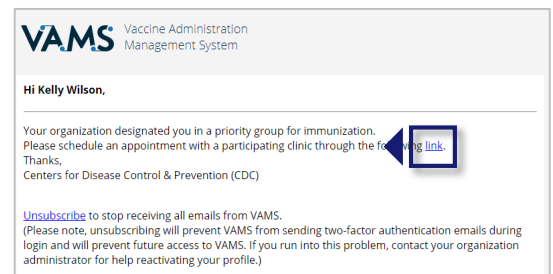
NOTE: The registration link in your email is for your registration only and cannot be used to register anyone else. Please do not forward it to anyone because the link will not work for them.

- Respond to the prescreening question, enter your state and county, complete the reCAPTCHA, then click **Next**.
- If you are eligible for vaccination after responding to the prescreening questions, you will progress to the account registration page.
- Check your email account for a **verification code** that will be sent to you immediately after clicking **Next**.
- **Enter the verification code** in the pop-up window in VAMS and click **Submit**.

NOTE: Every time you log into VAMS, you must verify your identity by entering your password, and a number you receive via email or SMS, depending on the preferred contact method you choose (two-factor authentication process). After five log-in attempt failures, you will be locked out of the system for one hour.

- Create and verify your **password**.
- Read the terms and conditions and **check the box** saying you agree, then click **Create Account**.

Upon activating your account, you will follow Steps 2–6 to register in VAMS.



□ Step 2: Provide Personal Information

What information you'll need to provide to complete this step

- Date of birth (DOB)
- Race and ethnicity
- Home address
- Cell phone number
- Preferred method of contact

• After activating your VAMS account, you will be taken through the account registration process. The first step of this process is to enter personal information.

• Your name and email address will already be entered since you just activated your account. If needed, you can edit your first and last name during registration.

➤ You are **required** to enter the following information as indicated by red asterisks next to these fields:

- Gender (option to decline to specify)
- Date of birth
- Race and ethnicity
- Home address
- Cell phone number
- Preferred method of contact (email or SMS/text message)

NOTE: If you elect to receive text messages, you can respond to an automated message with **HELP** at any time to be taken to the FAQs page in VAMS for assistance or **STOP** to opt-out of future messages.

If you **unsubscribe or opt out** of notifications, you will no longer receive any notifications from VAMS, including appointment reminders.

• Entering the following information is **optional**:

- Middle name
- Home phone
- Emergency contact name and phone number

➤ Click **Next**.

➤ If you select SMS as your preferred contact method, you will be prompted to enter a confirmation code sent to your cell phone. Enter the code, then click **Submit**.

❑ Step 3: Enter Insurance Information *(Optional)*

What optional information you can provide to complete this step

- Your insurance provider
- Group number
- Policy number

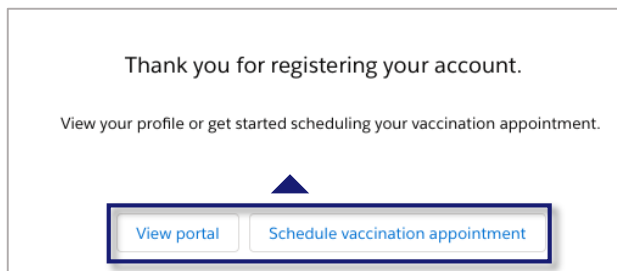
This step is optional.

- If you do not want to add insurance information, click **Next**.
- If you want to add insurance information, enter your insurance information, including:
 - Insurance provider
 - Group number
 - Policy number
- Click **Next**.

The screenshot shows a registration form titled "Register my account". At the top, there is a progress bar with five steps: a green circle with a checkmark, a green circle with a checkmark, a blue circle with the word "Insurance", a grey circle with the word "Organization", and a grey circle with the word "Review". Below the progress bar, the text "Provide available insurance information, if applicable." is displayed. There are three input fields: "Insurance provider", "Group number", and "Policy number". At the bottom right, there are two buttons: "Previous" and "Next". The "Next" button is highlighted with a blue border.

❑ Step 4: Review Your Information

- **Review** your personal and insurance (if applicable) information for accuracy. If any information is inaccurate, click **Previous** to make edits before moving forward.
- **Confirm** all information is correct and complete, then **check the box** that you agree the information is correct.
- Click **Finish**. This takes you to the Confirmation page.
- Click **View Portal** to be taken to the Recipient Portal home page or click **Schedule Vaccination Appointment** to begin scheduling an appointment.

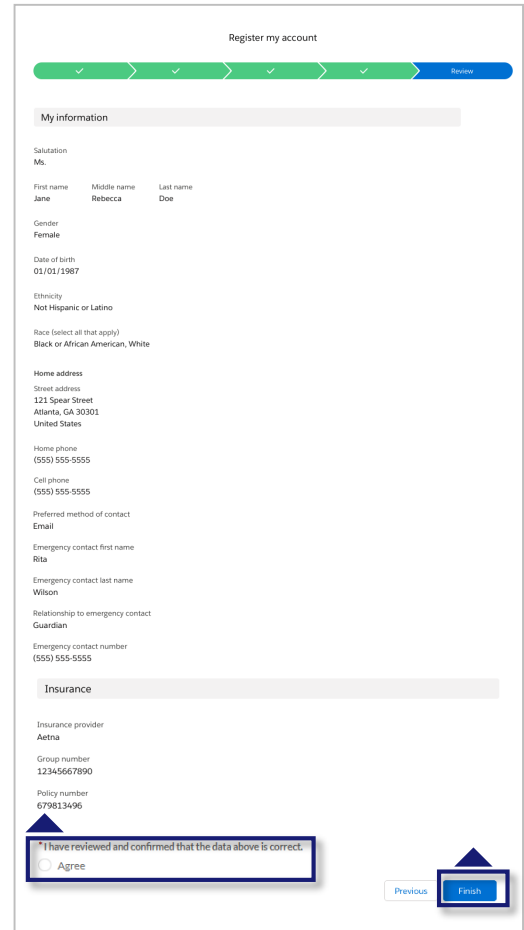


Thank you for registering your account.

View your profile or get started scheduling your vaccination appointment.

[View portal](#) [Schedule vaccination appointment](#)

NOTE: After registering, you can log in at any time to review or edit your information through the Recipient Portal tabs and to schedule a vaccination appointment.



Register my account

My information

Salutation
Ms.

First name
Jane

Middle name
Rebecca

Last name
Doe

Gender
Female

Date of birth
01/01/1987

Ethnicity
Not Hispanic or Latino

Race (select all that apply)
Black or African American, White

Home address

Street address
121 Spear Street
Atlanta, GA 30301
United States

Home phone
(555) 555-5555

Cell phone
(555) 555-5555

Preferred method of contact
Email

Emergency contact first name
Rita

Emergency contact last name
Wilson

Relationship to emergency contact
Guardian

Emergency contact number
(555) 555-5555

Insurance

Insurance provider
Aetna

Group number
1234567890

Policy number
678913496

☒ I have reviewed and confirmed that the data above is correct.

☐ Agree

[Previous](#) [Finish](#)